

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

RECEIVED

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Office Use Only CENTER

12FE4M5

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines.

AVOLLO LAW GROUP, LLC PAC

ADDRESS (number and street)

135 N PITTSBURGH STREET

Check if different than previously reported. (ACC)

GREENSBURG

PA

15601

2. FEC IDENTIFICATION NUMBER

C

3. IS THIS REPORT NEW (N) OR AMENDED (A) CITY STATE ZIP CODE STATE DISTRICT

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
July 15 Quarterly Report (Q2)
October 15 Quarterly Report (Q3)
January 31 Year-End Report (YE)
Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

- Primary (12P) General (12G) Runoff (12R)
Convention (12C) Special (12S)

Election on MM/DD/YYYY in the State of

(c) 30-Day POST-Election Report for the:

- General (30G) Runoff (30R) Special (30S)

Election on MM/DD/YYYY in the State of

5. Covering Period

01 01 2014 through 03 31 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Gina M. Kisel

Signature of Treasurer

Gina M Kisel

Date

04 30 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only

FEC FORM 3 (Revised 02/2003)

14031220008

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

Avalio Law Group, LLC PAE

Report Covering the Period:

From:

01 01 2014

To:

03 31 2014

COLUMN A  
This Period

COLUMN B  
Election Cycle-to-Date

6. Net Contributions (other than loans)

(a) Total Contributions (other than loans) (from Line 11(e)) ....

0

(b) Total Contribution Refunds (from Line 20(d)) .....

0

(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....

0

7. Net Operating Expenditures

(a) Total Operating Expenditures (from Line 17) .....

0

(b) Total Offsets to Operating Expenditures (from Line 14) .....

0

(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....

0

8. Cash on Hand at Close of Reporting Period (from Line 27) .....

0

9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....

0

10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....

0

For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

1403122009

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name

**Avolio Law Group, LLC PAC**

Report Covering the Period: From:

**01 01 2014**

To:

**03 31 2014**

**I. RECEIPTS**

**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date

**11. CONTRIBUTIONS (other than loans) FROM:**

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

0

0

(ii) Unitemized.....

0

0

(iii) TOTAL of contributions from individuals ▶

0

0

(b) Political Party Committees.....

0

0

(c) Other Political Committees (such as PACs).....

0

0

(d) The Candidate.....

0

0

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

0

0

**12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....**

0

0

**13. LOANS:**

(a) Made or Guaranteed by the Candidate.....

0

0

(b) All Other Loans.....

0

0

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0

0

**14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates; etc.).....**

0

0

**15. OTHER RECEIPTS (Dividends, Interest, etc.).....**

0

0

**16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶**

0

0

14031220010

**DETAILED SUMMARY PAGE**  
of Disbursements

**II. DISBURSEMENTS**

**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....

0

0

18. TRANSFERS TO OTHER  
AUTHORIZED COMMITTEES.....

0

0

19. LOAN REPAYMENTS:

(a) Of Loans Made or Guaranteed  
by the Candidate.....

0

0

(b) Of All Other Loans.....

0

0

(c) TOTAL LOAN REPAYMENTS  
(add Lines 19(a) and (b)).....

0

0

20. REFUNDS OF CONTRIBUTIONS TO:

(a) Individuals/Persons Other  
Than Political Committees.....

0

0

(b) Political Party Committees.....

0

0

(c) Other Political Committees  
(such as PACs).....

0

0

(d) TOTAL CONTRIBUTION REFUNDS  
(add Lines 20(a), (b), and (c)).....

0

0

21. OTHER DISBURSEMENTS.....

0

0

22. TOTAL DISBURSEMENTS  
(add Lines 17, 18, 19(c), 20(d), and 21) ▶

0

0

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....

0

24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....

0

25. SUBTOTAL (add Line 23 and Line 24).....

0

26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....

0

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD  
(subtract Line 26 from Line 25).....

0

- NO ACTIVITY -

14031220011

N/A

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

|   |                                      |                                     |                                     |                                    |
|---|--------------------------------------|-------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one) |                                     | PAGE                                | OF                                 |
|   | <input type="checkbox"/> 11a<br>12   | <input type="checkbox"/> 11b<br>13a | <input type="checkbox"/> 11c<br>13b | <input type="checkbox"/> 11d<br>14 |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Full Name (Last, First, Middle Initial)

**A.** Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee.  C

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt

MM / DD / YYYY

Amount of Each Receipt this Period

\_\_\_\_\_

Full Name (Last, First, Middle Initial)

**B.** Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee.  C

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt

MM / DD / YYYY

Amount of Each Receipt this Period

\_\_\_\_\_

Full Name (Last, First, Middle Initial)

**C.** Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee.  C

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt

MM / DD / YYYY

Amount of Each Receipt this Period

\_\_\_\_\_

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

\_\_\_\_\_

\_\_\_\_\_

14031220012

N/A

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

|                                      |                              |                              |                              |    |
|--------------------------------------|------------------------------|------------------------------|------------------------------|----|
| FOR LINE NUMBER:<br>(check only one) |                              | PAGE                         |                              | OF |
| <input type="checkbox"/> 17          | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |    |
| <input type="checkbox"/> 20a         | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |    |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Full Name (Last, First, Middle Initial)

**A.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

Category/Type

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

Category/Type

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

Category/Type

**SUBTOTAL** of Disbursements This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....

Amount of Each Disbursement this Period

Category/Type

14031220013

NIA

**SCHEDULE C (FEC Form 3)**

**LOANS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE OF  
FOR LINE NUMBER:  
(check only one)  13a  
 13b

NAME OF COMMITTEE (In Full)

LOAN SOURCE Full Name (Last, First, Middle Initial)

Election:  
 Primary  
 General  
 Other (specify) ▼

Mailing Address

City State ZIP Code

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period

TERMS Date Incurred Date Due Interest Rate Secured:  
M M / D D / Y Y Y Y M M / D D / Y Y Y Y % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

Table with 4 rows of guarantors. Each row includes: 1. Full Name (Last, First, Middle Initial), Mailing Address, City, State, ZIP Code, Name of Employer, Occupation, and Amount Guaranteed Outstanding.

SUBTOTALS This Period This Page (optional) TOTALS This Period (last page in this line only)

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

14031220014

N/A

# SCHEDULE C-1 (FEC Form 3) LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for  
Information found on  
Page \_\_\_\_ of Schedule C

Federal Election Commission, Washington, D.C. 20463

|                             |  |                           |  |
|-----------------------------|--|---------------------------|--|
| NAME OF COMMITTEE (In Full) |  | FEC IDENTIFICATION NUMBER |  |
|                             |  | C                         |  |

|   |                |                     |
|---|----------------|---------------------|
| LENDING INSTITUTION (LENDER)<br>Full Name | Amount of Loan | Interest Rate (APR) |
|   |                | %                   |

|                 |                              |                    |
|-----------------|------------------------------|--------------------|
| Mailing Address | Date Incurred or Established | MEM / DDD / YYYYYY |
|                 | Date Due                     | MEM / DDD / YYYYYY |
| City            | State                        | Zip Code           |

A. Has loan been restructured?  No  Yes If yes, date originally incurred MEM / DDD / YYYYYY

B. If line of credit, Amount of this Draw: Total Outstanding Balance:

C. Are other parties secondarily liable for the debt incurred?  
 No  Yes (Endorsers and guarantors must be reported on Schedule C.)

D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral?  
 No  Yes If yes, specify: \_\_\_\_\_

What is the value of this collateral? \_\_\_\_\_

Does the lender have a perfected security interest in it?  No  Yes

E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan?  No  Yes If yes, specify: \_\_\_\_\_

What is the estimated value? \_\_\_\_\_

A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).

Location of account: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Date account established: MEM / DDD / YYYYYY

F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.

|                        |                    |
|------------------------|--------------------|
| G. COMMITTEE TREASURER | DATE               |
| Typed Name             | MEM / DDD / YYYYYY |
| Signature              |                    |

H. Attach a signed copy of the loan agreement.

I. TO BE SIGNED BY THE LENDING INSTITUTION:

- I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above.
- II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness.
- III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.

|                           |       |                    |
|---------------------------|-------|--------------------|
| AUTHORIZED REPRESENTATIVE |       | DATE               |
| Typed Name                | Title | MEM / DDD / YYYYYY |
| Signature                 |       |                    |

14031220015



N/A

**FEC FORM 3Z (File with Form 3)**

**CONSOLIDATION REPORT OF RECEIPTS AND DISBURSEMENTS**

(To Be Used By A Principal Campaign Committee)

|  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Name of Principal Campaign Committee (In Full) | Report Covering Period:<br>From: <table style="display: inline-table; border: 1px solid black; border-collapse: collapse; margin-right: 5px;"><tr><td style="width: 15px; height: 15px; text-align: center;">M</td><td style="width: 15px; height: 15px; text-align: center;">M</td><td style="width: 15px; height: 15px; text-align: center;">M</td></tr></table> / <table style="display: inline-table; border: 1px solid black; border-collapse: collapse; margin-right: 5px;"><tr><td style="width: 15px; height: 15px; text-align: center;">D</td><td style="width: 15px; height: 15px; text-align: center;">D</td><td style="width: 15px; height: 15px; text-align: center;">D</td></tr></table> / <table style="display: inline-table; border: 1px solid black; border-collapse: collapse; margin-right: 5px;"><tr><td style="width: 15px; height: 15px; text-align: center;">Y</td><td style="width: 15px; height: 15px; text-align: center;">Y</td></tr></table><br>To: <table style="display: inline-table; border: 1px solid black; border-collapse: collapse; margin-right: 5px;"><tr><td style="width: 15px; height: 15px; text-align: center;">M</td><td style="width: 15px; height: 15px; text-align: center;">M</td><td style="width: 15px; height: 15px; text-align: center;">M</td></tr></table> / <table style="display: inline-table; border: 1px solid black; border-collapse: collapse; margin-right: 5px;"><tr><td style="width: 15px; height: 15px; text-align: center;">D</td><td style="width: 15px; height: 15px; text-align: center;">D</td><td style="width: 15px; height: 15px; text-align: center;">D</td></tr></table> / <table style="display: inline-table; border: 1px solid black; border-collapse: collapse;"><tr><td style="width: 15px; height: 15px; text-align: center;">Y</td><td style="width: 15px; height: 15px; text-align: center;">Y</td></tr></table> | M | M | M | D | D | D | Y | Y | Y | Y | Y | Y | Y | Y | M | M | M | D | D | D | Y | Y | Y | Y | Y | Y | Y | Y |
| M  | M  | M |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| D  | D  | D |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Y  | Y  | Y | Y | Y | Y | Y | Y |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| M  | M  | M |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| D  | D  | D |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Y  | Y  | Y | Y | Y | Y | Y | Y |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

|                       |  |  |
|-----------------------|--|--|
| <b>Committee Name</b> | (a)<br>Line No. 11(a)<br>Total Contributions From<br>Indiv./Persons Other Than<br>Political Committees | (b)<br>Line No. 11(b)<br>Total Contributions<br>From Political Party<br>Committees |
| A                     |  |  |
| B                     | Column Total Last Page Only.....   |  |

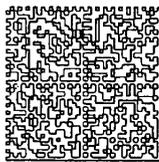
|   | (c)<br>Line No. 11(c)<br>Total Contributions<br>From Other Political<br>Committees                     | (d)<br>Line No. 11(d)<br>Total Contributions<br>From The<br>Candidate | (e)<br>Line No. 11(e)<br>Total<br>Contributions        | (f)<br>Line No. 12<br>Total Transfers<br>From Other Authorized<br>Committees     | (g)<br>Line No. 13(a)<br>Total Loans Made or<br>Guaranteed by<br>the Candidate          | (h)<br>Line No. 13(b)<br>Total All<br>Other Loans                                       |
|---|--|---|--|--|---|---|
| A |  |   |  |  |   |   |
| B |  |   |  |  |   |   |
|   | (i)<br>Line No. 13(c)<br>Total<br>Loans  | (j)<br>Line No. 14<br>Total Offsets to<br>Operating<br>Expenditures   | (k)<br>Line No. 15<br>Total<br>Other<br>Receipts       | (l)<br>Line No. 16<br>Total<br>Receipts  | (m)<br>Line No. 17<br>Total<br>Operating<br>Expenditures                                | (n)<br>Line No. 18<br>Total Transfers to<br>Other Authorized<br>Committees              |
| A |  |   |  |  |   |   |
| B |  |   |  |  |   |   |
|   | (o)<br>Line No. 19(a)<br>Total Loan Repayments<br>of Loans Made or<br>Guaranteed by The Can-<br>didate | (p)<br>Line No. 19(b)<br>Total Loan Repayments<br>of All Other Loans  | (q)<br>Line No. 19(c)<br>Total Loan<br>Repayments      | (r)<br>Line No. 20(a)<br>Total Contribution<br>Refunds to<br>Individuals/Persons | (s)<br>Line No. 20(b)<br>Total Contribution<br>Refunds to Political<br>Party Committees | (t)<br>Line No. 20(c)<br>Total Contribution<br>Refunds to Other<br>Political Committees |
| A |  |   |  |  |   |   |
| B |  |   |  |  |   |   |
|   | (u)<br>Line No. 20(d)<br>Total<br>Contribution<br>Refunds  | (v)<br>Line No. 21<br>Total Other<br>Disbursements                    | (w)<br>Line No. 22<br>Total<br>Disbursements           | (x)<br>Line No. 23<br>Cash on Hand<br>Beginning of<br>Reporting Period           | (y)<br>Line No. 27<br>Cash on Hand<br>Close of<br>Reporting Period                      | (z)<br>Line No. 9<br>Debts & Obligations<br>Owed TO the<br>Committee                    |
| A |  |   |  |  |   |   |
| B |  |   |  |  |   |   |
|   | (aa)<br>Line No. 10<br>Debts & Obligations<br>Owed BY the<br>Committee                                 | (bb)<br>Line No. 6(c)<br>Net Contributions                            | (cc)<br>Line No. 7(c)<br>Net Operating<br>Expenditures |  |   |   |
| A |  |   |  |  |   |   |
| B |  |   |  |  |   |   |

14031220017

14031220018

Avolio Law Group, LLC  
135 W. Pittsburgh Street  
Greensburg, PA 15601

PITTSBURGH  
PA 15601  
11 APR 14  
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Washington, DC 20463

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**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
 The FEC added this page to the end of this filing to indicate how it was received.

|  |   |
|--|---|
| <input type="checkbox"/> Hand Delivered                                    | Date of Receipt                                     |
| <input checked="" type="checkbox"/> USPS First Class Mail                  | Postmarked<br>4/11/14                               |
| <input type="checkbox"/> USPS Registered/Certified                         | Postmarked (R/C)                                    |
| <input type="checkbox"/> USPS Priority Mail                                | Postmarked  |
| <input type="checkbox"/> USPS Priority Mail Express                        | Postmarked  |
| <input type="checkbox"/> Postmark Illegible                                |   |
| <input type="checkbox"/> No Postmark                                       |   |
| <input type="checkbox"/> Overnight Delivery Service (Specify):             | Shipping Date                                       |
|  | Next Business Day Delivery <input type="checkbox"/> |
| <input type="checkbox"/> Received from House Records & Registration Office | Date of Receipt                                     |
| <input type="checkbox"/> Received from Senate Public Records Office        | Date of Receipt                                     |
| <input type="checkbox"/> Received from Electronic Filing Office            | Date of Receipt                                     |
| <input type="checkbox"/> Other (Specify):                                  | Date of Receipt or Postmarked                       |

  
 PREPARER

4/16/14  
 DATE PREPARED

14031220019